



STATE OF TENNESSEE
TENNESSEE REAL ESTATE APPRAISER COMMISSION
APPRAISAL MANAGEMENT COMPANY REGISTRATION
DEPARTMENT OF COMMERCE AND INSURANCE
500 JAMES ROBERTSON PARKWAY
NASHVILLE, TENNESSEE 37243
Phone (615) 741-1831 Fax (615) 253-1692
<http://tn.gov/commerce/boards/treac/index.shtml>

*** FOR OFFICE USE ONLY**

Profession 1504

Tennessee Appraisal Management Company Registration Number: _____

APPRAISAL MANAGEMENT COMPANY NAME: _____

MAILING ADDRESS: _____

PHYSICAL BUSINESS ADDRESS (If different): _____

BUSINESS PHONE NUMBER: _____

BUSINESS E-MAIL ADDRESS: _____

WEBSITE: _____

CONTROLLING PERSON (**REQUIRED**): _____

CONTROLLING PERSON PHONE NUMBER: _____

CONTROLLING PERSON E-MAIL ADDRESS: _____

BIANNUAL CERTIFICATION AFFADAVIT OF CONTROLLING PERSON

I, _____, (Name of Controlling Person) do hereby certify that I am fully aware of my responsibilities under T.C.A. § 62-39-410 as the designated controlling person/managing Principal to ensure compliance with all applicable state laws and rules on behalf of the registered Appraisal Management Company's operation in Tennessee. I have never been convicted of a criminal act involving moral turpitude. I have not had a license or certificate to act as an appraiser refused, revoked or surrendered in lieu of disciplinary action in any state.

The Appraisal Management Company named in this application:

- 1) Has a system and process in place to verify that all individuals added to the appraiser panel of the Appraisal Management Company for appraisal services to be performed in Tennessee holds a license or certification in good standing issued by the Tennessee Real Estate Appraiser Commission.
- 2) Has a system and process in place to verify that an individual to whom the appraisal management company is making assignments for the completion of appraisals has not had a license or certification as an appraiser refused, denied, cancelled, revoked, or surrendered in lieu of a pending revocation.
- 3) Has a system in place to review the work of all appraisers who are performing real estate appraisal services in Tennessee for the Appraisal Management Company on a periodic basis to validate that the real estate appraisal services are being conducted in accordance with USPAP, pursuant to T.C.A. § 62-39-416.
- 4) Maintains a detailed record of each service request that it receives for appraisal services within the state of Tennessee and the appraiser who performs the real estate appraisal services for the Appraisal Management Company, pursuant to § 62-39-417.

I, _____, as controlling person, do hereby certify that records of any appraisal activity conducted in the State of Tennessee which issues the Appraisal Management Company registration will be kept at the following address: _____, and that they will be available to the Commission, or the Commission staff or designee during normal business hours.

I further certify that I have personally accepted the assigned responsibility of the controlling person as defined in T.C.A. § 62-39-402. If there is any change in my status as controlling person or if my contact information changes, I will notify the Real Estate Appraiser Commission within thirty (30) days of any change. I will notify the Commission within thirty (30) days of a change in the agent for service of process of record, or ownership composition.

SIGNATURE OF CONTROLLING PERSON

PRINTED NAME OF CONTROLLING PERSON

STATE OF _____

COUNTY OF _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS THE _____ DAY OF _____.

NOTARY PUBLIC

SEAL

MY COMMISSION EXPIRES